

STANDARD TRAVEL ORDER
FOR MILITARY PERSONNEL

1. SSN	2. NAME (Last Name, First Name, MI)	3. RATE/RANK	4. CURRENT DUTY STATION
5. LEAVE ADDRESS (Street / Address, City, State, Zip / Area Code & Phone)			6. TRANSFER AUTHORITY

7. TRAVEL AND PAY NECESSARY TO THE EXECUTION HEREOF IS REQUIRED IN THE PUBLIC INTEREST AND IS AUTHORIZED CHARGEABLE AGAINST:														
AGENCY	DISTRICT	APPN CODE	LIM CODE	ALLOT FUND	ALLOT LVL	PROGRAM ELEMENT	COST CENTER	OBJECT CLASS	DOCUMENT IDENTIFICATION NUMBER				ESTIMATED COST	MISC
									TYPE	FY	NUMBER	SUFFIX		

8. DAYS AUTHORIZED DELAY EN ROUTE BY REGULATIONS OR ENDORSEMENT HEREON (Indicate number of days delay authorized):

TRAVEL TIME	PROCEED TIME	LEAVE (INCONUS)	LEAVE (OUTCONUS)	COMPENSATORY ABSENCE	NON CHARGEABLE ABSENCE	DATE LINE ADJUSTMENT
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9. PROCEED AND REPORT IN THE ORDER LISTED BELOW:		SCHEDULED DEPARTURE DATE:
UNIT/STATION/PLACE	NATURE OF DUTY	TIME/DATE REPORTING

10. REMARKS/AUTHORIZATIONS/ADDITIONAL INSTRUCTIONS:

11. Member's Acknowledgement: I have been counselled on the appropriate provisions of the JFTR and Coast Guard Directives regarding my entitlements, and have had all my questions answered. If under PCS orders, I understand I must secure a "Release From Mandatory Assignment to Government Housing" from the Local Housing Authority (LHA) prior to procuring housing in the civilian sector of the area surrounding my new duty assignment. Further, I acknowledge receipt of these orders and understand that I must submit my travel claim for certification and liquidation purposes within 3 working days of either my PCS reporting, ADT greater than 20 weeks, or completion of travel in connection with my separation.

12a. AUTHORIZING OFFICIAL (Name, Rate/Rank, Signature)	12b. DATE	13a. MEMBER'S SIGNATURE AND PLACE ORDERS RECEIVED	13b. DATE
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